

NATIONAL BOARD OF HEALTH.



CLOSING ARGUMENT

SUBMITTED TO THE

COMMITTEE ON PUBLIC HEALTH

OF THE HOUSE OF REPRESENTATIVES,

48TH CONGRESS, 1ST SESSION,

In support of House Bill 2785 for the protection of the public health, and in refutation of the charges made against the Board by the Supervising Surgeon-General of the Marine Hospital Service.

WASHINGTON, D. C.
GIBSON BROTHERS, PRINTERS.
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Closing argument submitted to the Committee on Public Health of the House of Representatives in support of House Bill 2785 on behalf of the National Board of Health.

Mr. Chairman and Gentlemen of the Committee :

At your session of March 13th it was agreed that, instead of making the final arguments orally, they should be presented in writing, and I therefore submit the following statement on behalf of the Board.

The Board seeks substantially the re-enactment of the act of June 2, 1879, and asks you to recommend it as for the public good.

The importance of the subject cannot well be exaggerated. The prevalence within our borders of an epidemic of some contagious disease like yellow-fever is attended with such disastrous consequences to the community, both as to persons and property, as to make the prevention and repression of such evils one of the most important public duties which can engage the attention of the statesman and lawgiver. It has been repeatedly shown to Congress that the mere pecuniary loss to the nation by the destruction and obstruction of commerce caused by some of these visitations is very great ; that by the epidemic of 1878 has been estimated at \$200,000,000.

In one way or another the whole people are interested in the subject before you, and it is safe to say they will not only approve but expect some proper measures of protection under the national authority.

It has already been shown you that the National Board was created and invested by Congress with the powers now sought to be renewed, in response to the strong and growing public sentiment which the frequent occurrence of such epidemics have excited. You have seen, also, that the legislation then finally adopted was preceded by an exhaustive consideration and dis-

cussion of the principles involved and of the various modes in which the problem of extending national aid might be solved.

I do not understand that the Committee propose to reconsider all this under the present issue, which is simply whether the provisions of the act of June 2, 1879, shall be revived and made permanent, or whether these important interests shall be subjected to the uncertainties of annual legislation in the appropriation bills.

A bill has been introduced lately at the request of the Surgeon-General to abolish this Board and to vest its past and present powers in a departmental Board, including his service, and he has made some remarks before you upon that subject. Whenever the Committee shall desire to hear from the Board as to the merits of that proposition, it will endeavor to properly respond. For the present, it is enough to call your attention to the fact that the policy of administering national aid in quarantine by one or more of the Executive Departments, or by a Board composed of members appointed from private life, and representing different sections of the country, was thoroughly considered by Congress. (Letter of Dr. Smith, pp. 19 to 22; Report 1883, pp. 26 to 33.)

Although the decision was substantially in favor of the latter method, the wise and conciliatory policy was adopted of combining the official element by adding representatives from four of the Executive Departments to the Board, and by section seven of the act of June 2, 1879, Congress took a further step in the same direction by authorizing the President, at the request of the Board, to detail officers of the several departments for temporary duty under its direction.

Congress evidently intended the executive authority, acting through its representatives in the Board and otherwise, to be exercised in hearty co-operation to promote the ends to be attained by the Board according to the spirit of the laws enacted in that behalf. The case before you shows that in the opinion of the Board this obligation has been loyally fulfilled with one exception.

As it stands, the bill appears to have no higher sanction than the wishes of the Surgeon-General; and while the power of Congress to enact it is undoubted, the right of a subordinate of one Department to place three Departments in apparent antagonism to the Board is so far questionable at least, I submit, as to call for some evidence that the bill represents the sentiment of the heads of those Departments before it is seriously considered.

Returning, then, to the matter in issue, how stands the case?

The fact that the bill of the Surgeon-General creates a Board shows that even he admits its efficiency in principle, but he thought the National Board was unwieldy. The only reason given for this was an incident of small-pox on the Upper Missouri. (Appendix, p. 50.)

On his own statement he proves nothing, for it took him until the next day to answer the telegram of the collector, and it would have taken no more time to procure the attendance of the non-resident members of the Executive Committee of the Board. It appears also that in that remote, unsettled region, 'there was no local board of health, and the disease was among the sailors on a steamboat—facts which indicate that it was more properly a matter for his attention than that of the Board. It ought to be said, however, that the Executive Committee of the Board has always been so selected as to contain a quorum of resident members, and those non-resident are not farther distant than New York city.

The trifling nature of the charge at best is a sufficient index of the merit of the objection.

It will be well to note in this connection the claim of certain special advantages of the Treasury Department for the management of quarantine on which great stress was laid; (Appendix, 51, 52,) consisting in the service of Customs-officers thirty-seven revenue cutters and sundry tugs, the Coast Survey and Commercial Bureaus, and the Marine Hospital Service.

As these designated persons or things have other proper du-

ties to perform, the incidental service that might be rendered in aid of quarantine would not be likely to amount to as much as is imagined ; but the chief defect of the claim is in the implication that the benefit of these appliances can be obtained only by confiding the control of quarantine to the Surgeon-General. The requirement of section seven of the act of June 2, 1879, has been mentioned, and under that, if renewed, or even aside from it, it cannot be presumed that the President and Secretary, holding their high trust for the public good, would withhold from the Board any aid which it might lawfully ask.

It follows that the Hospital Service in this matter must stand on its own merits as claimant of the service rendered for four years by the Board.

The character of the Board, the nature and extent of its service, and the estimate of it by competent judges, have been brought to your attention. No one but the Surgeon-General has attacked it before you, and his opposition was invited because the Board felt that it would be manifested as heretofore, and wished it to be made where the Board could know the nature and extent of his charges, and be prepared to meet them. You are advised also of the peculiar advantages he possesses in having had the same member of his service in the Board from its organization to the present time, so that nothing in its history and records has not been within his knowledge. No organization could be put to a severer ordeal than that of the assault of a hostile force so equipped as to means of offence, and so inspired as to motive. Your attention is invited to the result.

The main point is : Did the Board faithfully execute the act sought to be renewed ?

In two of the four years there were epidemics of yellow fever. In all, the Board was actively engaged in its work. It disbursed in aid in all ways more than half a million dollars in that time. The details it is impossible to give, but they are

fully set forth in its reports and its records are all open to your inspection.

The sum of the fiscal errors charged is within \$2,500, in this, that \$2,500 was paid for a barge in 1880, which, when it came into the hands of the Surgeon-General in 1883, he says was worthless. It was charged also that Dr. Verdi was paid \$300 for work alleged to have occupied his time for 30 days, the worth of which, in his opinion, the Surgeon-General does not state, but this employment had no connection with quarantine.

You have the Board's defence on these items, and are satisfied, I trust, that there is no good ground for the objections raised; but even if the Board had paid too much for the barge and the "essay," what would be indicated by errors so trifling as compared with the amounts disbursed judiciously, so far as appears?

As to other errors of judgment, the only allegation is that some of the boats turned over to the Surgeon-General in July, 1883, (and which had been in use three years,) were then in bad repair, so that it was concluded to be cheaper to sell them than to repair them. The Board questioned this; but taking it in its worst aspect, what does it amount to?

There was an attack also mainly directed against the present Secretary of the Board concerning work done by him before he became a member, being paid only his expenses, which has been answered, and this is in substance everything that affects the work of the Board—only two of the four charges relating to quarantine.

In my former remarks I referred to charges which seemed to bear, though in an indefinite way, against the integrity of the Board. The language cited relating to a "corruption fund" (p. 46) is explained in the reply (p. 7) in such a way, as I understand it, as to relieve it of that imputation, as is the reference also to the endorsement of prominent sanitarians from any imputation of a corrupt understanding, (p. 6;) but the Surgeon-General reiterates his conviction of the truth of the statements of the Tarble letter, (p. 10.) My remarks on

that subject were from recollection only. I find the letter makes no direct charge against the National Board, but indulges in some statements as to the division of the money, the probable truth of which you can judge of from the fact that the National Board has brought before you the vouchers for every dollar of that expenditure, showing that it was disbursed apparently to nurses, as indicated by their receipt on the pay-rolls, in accordance with the terms of the appropriation. (Appendix D, remarks, p. 60.)

These charges, as now explained, were made apparently to break the force of the natural inference in favor of the Board from the endorsements laid before you of its worth and service by various sanitary and medical organizations, and they are reduced substantially to the allegation that these commendations are entitled to little or no weight, because it has been the policy of the Board to secure the support of local boards and of individuals by pecuniary aid and employment.

If the Board has been governed by such motives, is it not remarkable that in the present crisis it has presented you with testimonials from only four out of fifteen aided boards, while testimonials from eleven unaided boards and twelve other medical and sanitary associations are included. Stronger proof of the integrity of the Board's intent in that respect can hardly be given than is afforded by this circumstance.

The weakness of the attack is evident when he has to assail the policy of Congress in making such appropriations, (Reply, p. 7,) not reflecting that the best judgment of statesmen at all times in our history has been that national aid can be constitutionally extended only in that way. His likening the relation between the national and local boards to that of employer and employé is essentially unjust. Congress gives money for the use of the latter, and their claim is one of right and not of favor, though the National Board may rightfully exercise its judgment as to the extent of the need and its means of relief. The Pensacola correspondence before you (Appendix D, p. 60)

and circular No. 7 (Appendix C, p. 58) set the matter in its true light.

There is nothing left of these charges, then, but the fact that four aided local boards have "endorsed" the National Board, and that three or four eminent sanitarians who have at some time been employed by the Board in its work may have given their influence in its favor in local organizations to which they belonged. That there would be no impropriety in this is manifest not only on its face, but from the fact that the Surgeon-General has produced a like endorsement of his service by the Pensacola board, whose President was employed to maintain the cordon there. (Reply, p. 7; Appendix, pp. 46, 47, 48.)

Assuming even that the Board had sought for these endorsements, what more proper step could it take than to ask those best qualified to judge of its work to state their opinion of it for the information of Congress as bearing on the proposed legislation? Is it fair to presume without proof or reason that these twenty-seven organizations in all parts of the country have combined to sustain a Board by representations which they did not know or believe to be true?

Enough has been said to demonstrate the baselessness of the Surgeon-General's criticism of the Board. In the reply, some new matter in the line of that already considered has been added. Not being acquainted with the facts for the reasons heretofore given, I have requested Dr. Smart to set forth the details of the various matters presented in the reply, and his statement is annexed.

Some points in reply to the criticism of the Board remain to be noted.

Attention is called to vouchers of the Board for expenditures at New Orleans. (Reply, p. 15.)

That was for service found necessary during the epidemic of 1879. If the Surgeon-General had expended money at Pensacola under like circumstances, it is likely his judgment would not have been questioned by his superiors; but as I understand, he made an agreement that the Government would pay for

certain work out of the epidemic appropriation under circumstances which his superiors did not regard as justifying it, and his judgment was not approved.

It is said also to be "singular that Mr. Ellis's speech was singled out for attack among all those that were made against the Board."

The Board has not charged that the material of the other speeches referred to was furnished by the Surgeon-General, because there was no direct proof of the fact. I selected the case in which the record put the intervention of the Surgeon-General beyond question, and there was no attack on the member making the remarks quoted. His name, even, was not mentioned by me. I merely argued that he was misled by his informant, who had the means of accurate knowledge, and was therefore responsible for not imparting it. The Board believes, however, from all the facts and circumstances in the case, that the opposition of the other members mentioned was inspired by the Surgeon-General, and that they also were misled in the matter. Without charging any intentional wrong on any one, the Committee can readily see how much injustice might be done to the Board by *ex-parte* statements, as for instance the letter of the Surgeon-General to a member of the Committee of the last Congress, to which the Board had no opportunity to reply, (Appendix to Reply, p. 46,) and the value, therefore, of such an investigation as this in eliciting the truth.

I have not intended in my remarks to give more weight to the personal features of this controversy as affecting the Surgeon-General than the necessities of the case in the opinion of the Board seemed to demand, and I regret that there should have been any such necessity. The charges made against him are reasonably definite, and such, I think, as go to the merits of the case. Of their importance to the issue and sufficiency you are the judges. On the other hand, the Board has good ground to call your attention to the vague, indefinite nature and terms of the statements against it, and to the fact that

they rest so largely in innuendo in print, and were conveyed so largely by tone and manner in the oral address. The Board has endeavored to meet the possible implications as well as the legitimate inferences from the form of that address, and if it shall seem to you that in some cases needless labor has been expended the apology is that it desires to leave no doubt in your minds of its fidelity to the trust it has held for the public since it was created.

Respectfully submitted.

THOMAS SIMONS,

Member of the Board from the Department of Justice.

THOS. SIMONS, Esq'r.,

Ass't Attorney-General :

SIR: The following criticism on the papers laid before the Committee on Public Health of the House of Representatives by Dr. Hamilton, on March 13, 1884, is respectfully submitted :

The charge against Dr. Hamilton of having circulated mis-statements to the detriment of the National Board of Health, when its members were not present, is characterized by him in the most positive manner as untrue. " This is false," he says, (Answer of the Supervising Surg'n-Gen'l, page 3,) " and no proof has been submitted to the Committee to sustain it."

This charge was based upon Dr. Hamilton's connection with misrepresentations as to the cost of the work at Ship Island Refuge Station, and as to the character of the investigations conducted by the Board under the authority of its constituting act. The member of Congress who, under the influence of those misrepresentations, charged the Board with having frittered away the public money, appropriated for them, uselessly and foolishly, not to say extravagantly, stated that he had obtained his information from Dr. Hamilton. Indeed, Dr. Hamilton (Answer, p. 18) acknowledges that he furnished the information. He endeavors to shield himself in this matter under the assumption that the words *essay* and *investigation* are synonymous—a position which no school-boy would assume ; or that the investigations in the cases tabulated by him as essays were in reality no other than what he called them—a position which no intelligent man who has looked at the reports of the Board containing the accounts of these investigations would assume. Since neither of these assumptions may be entertained, it must be inferred that the information was furnished to be used, as it was used, to the detriment of the Board, when its members were not present to reply.

As to the work at Ship Island, Dr. Hamilton must be held capable of knowing that *inspected* and *infected* have not the same meaning ; and if, through any mistake of his, Mr. Ellis or others were led to believe the Board or any of its members unworthy or incapable, his part, as an honorable man, consisted in immediately acknowledging that mistake and in apologizing publicly to the Board therefor.

Dr. Hamilton says (p. 21) that "it is somewhat singular that Mr. Ellis's speech is singled out for attack among all those that were made against the Board," and inquires why the Board did not attack Mr. Cox and others. It seems proper to point out that Mr. Ellis's speech was not attacked. The subject of attack, to use Dr. Hamilton's phraseology, was the public official who furnished Mr. Ellis with mistaken statements, (allowing the word *inspected* to have been a mistake for *infected*, although in matters touching the integrity of an honorable body mistakes of this character should not be permitted to occur,) and with facts perverted with the intent to deceive.

Mr. Ellis's speech was singled out to sustain the charge against Dr. Hamilton, because the misstatements, his connection with them, and the real facts in the case may all be found in the one issue of the Congressional Record, (Feb'y 21, 1883,) p. 73 *et seq.*

Other instances involving misrepresentation on Dr. Hamilton's part were not brought forward ; first, because the charge made against him was sustained by the proofs of the one specification, and secondly, because this instance was considered of itself as sufficient to show his animus towards the Board of Health and his methods of operating.

The Board in replying to the statements or charges preferred against it by Dr. Hamilton had to trust to memory for the terms in which they were conveyed. Dr. Hamilton declined to furnish a written summary, although this was officially requested of him. The Board recognized that the purchase price of the barge "Selden" and its condition at the time of purchase were in some manner brought in question, and testi-

mony from the Quarantine Commissioners, Norfolk, Va., was submitted (see Board's Statement, pp. 2 and 3) on these points. It is now found (Answer, p. 4) that while they were properly touched upon in the Board's reply, a direct reference to the statements that the barge "has been of no service and is now a total wreck" was omitted.

The letters of the Quarantine Commissioners (on file) afford evidence that the barge was admirably suited for the work intended, and that she was at her station ready for the appearance of yellow fever from the time of her purchase till she was transferred, June 30, 1883. Her wreck was an accident which occurred subsequent to her transfer to the Marine Hospital Service, and of this the Board has no knowledge save that conveyed in Dr. Hamilton's own statement, and a reference to it in the filed letter of Dr. Nash, "that she was finally wrecked by having a hole stove in her bottom by her own anchor through the culpable negligence or mismanagement of those in charge of her."

The letters which Dr. Hamilton submits (Answer, p. 4) mainly refer to the unseaworthiness of the barge in rough water. When purchased she was not intended for such service. Her station and duties were defined, and she was found well fitted to last at the one and to discharge the others. As well might our river steamers be declared worthless because unfit to go on the Greeley Relief Expedition.

On page 5 (Answer) Dr. Hamilton attempts to strengthen the case of the Selden by the statement that \$1,678.73 was paid for repairs immediately after her purchase, evidently implying that, since such a large percentage on the purchase money had to be expended, she must have been very worthless indeed. This is fresh matter and more misrepresentation. The money was paid for building a hospital ward on her deck and fitting her out otherwise for the accommodation of the sick. References to this work may be seen in the letters of Dr. Nash and Mr. Murdaugh, the latter having superintended it.

To a man who supervises hospitals which cost from fifty to five hundred thousand dollars, the Selden, as a quarantine hospital, must have appeared of small value, although she gave satisfaction as a temporary and cheap substitute for the refuge station, which, since her wreck, Dr. Hamilton has recommended to be built at an expense of \$50,000. (See his Ann. Rep., 1883, p. 52.)

The Board was led to infer from Dr. Hamilton's reference to the sop on which sanitarians had been fed, and from his statement that the appropriation in aid of local boards was, in its nature, a corruption fund, that a charge of corruption was insinuated. It is found now, however, (p. 6, Answer,) that all that was meant by the loose use of such words was to detract from the value of the testimonials furnished on behalf of the Board and its work by boards of health and sanitary and medical societies and associations. "Of course they endorse," he says. "I do not say—I have not said—that the endorsement was corrupt." Dr. Hamilton has failed to observe that Mr. Simons had already touched on this view of the charge and showed its want of foundation in facts. (Board's Statement, p 48.) Testimonials of confidence in the Board, given by twenty-seven bodies, were filed in the present investigation, and of these but four have applied for and received aid. Eleven boards that were aided are not represented among the twenty-seven.

As illustrating the methods by which, in his opinion, such testimonials are obtained, Dr. Hamilton shows by an extract from the executive minutes of the Board, August 1, 1879, that the Board communicated with the State board of health of Kentucky inquiring whether aid was necessary, and requesting to be furnished with the names of two or three men capable of acting as inspectors. He further shows that on Oct. 23, 1879, a list of thirty-two appointees of the State board of health of Tennessee was approved. It is not charged that there was anything corrupt in this, but only that it explains how these boards come forward with testimonials. Dr. Hamilton

is unfortunate in his illustrations, inasmuch as no testimonials from these boards of Kentucky and Tennessee appear in the list of twenty-seven filed.

While showing that the Board of Health coöperates, in accordance with law, with State and local boards, Dr. Hamilton takes occasion to say that his methods are different, and that he has no financial transactions with local boards or their officers. He has expended the epidemic fund at Brownsville, Texas, and Pensacola, Florida. At Brownsville there was no local board of health, and at Pensacola Mr. Guttman, the worthy gentleman—energetic, faithful, and thoroughly competent—whom he placed in charge of the Pensacola navy-yard cordon was the president of the Pensacola board of health. And on page 48 of Hamilton's report to the Secretary of the Treasury on the management of the epidemic fund may be found resolutions of the board of health of Pensacola expressing perfect satisfaction with the conduct of the Marine Hospital Service, signed Jno. B. Guttman, president.

On page 8 Dr. Hamilton gives extracts from the minutes of of the Board showing that it had under consideration the propriety of sending representatives to the Sanitary Council of the Mississippi Valley. This appears in connection with a statement that it has not been the custom of the Marine Hospital Service to ask the endorsement of societies or to appoint persons to represent it at such society meetings with the view to imply that the Board of Health has done one or other of these things. The Board has considered it its duty, under the requirement of its constituting act to obtain information on all matters pertaining to the public health, to be present by representation at such meetings, and, with other members, Dr. Baillache, the member from the Marine Hospital Service, has represented the Board at the American Public Health Association.

But no evidence is offered that the Board influenced the Sanitary Council. Indeed, it is not in terms charged with having attempted to do so.

As to the editorial from the St. Louis *Medical Review* of February, it cannot but be a source of satisfaction to the members of the Board to learn (page 16, Answer) that some one is always to be found at the meetings of the sanitary and medical societies to secure support to the Board of Health, and that it counts many friends in at least two prominent sanitary associations. It is gratifying to know that the work of the Board in the public interest is so well and favorably known, despite much published and unpublished detraction.

On page 15 Dr. Hamilton endeavors to justify his contract with the Pensacola board of health, to pay for their street-cleaning and drainage out of the funds of the United States, by showing that the National Board of Health in September, 1879, paid for laborers, drivers, carts, and wagons which were used in New Orleans. He does not state the difference in the conditions of the two cities at these times. New Orleans was infected with yellow fever, and the laborers, drivers, carts, and wagons were engaged in the effort to check the progress of the pest by disinfection. Pensacola, at the time of the Marine Hospital Service contract, was as free from the disease as Detroit, Michigan, or any other Northern city.

On page 20 Dr. Hamilton reiterates his inability to understand how his cordon at Brownsville differed from that established by Dr. Owen of the Navy, at the Pensacola navy-yard. Dr. Owen placed a guard around 1,700 men, women, and children, and by doing so preserved them from the infection of yellow fever. Dr. Hamilton placed a guard around so many yellow fever patients, and more than 1,700 well men, women, and children in Brownsville, and kept it there until each of those well men, women, and children who were susceptible to the disease had suffered from or died from yellow fever. But, he says, there was room between his guards and the city for the people to scatter, had they so desired. Many may have desired to do so, but were unable to effect it for want of shelter and provisions. (See the remarks of Dr. Hillary Ryan, of Texas, Proceedings American Public Health Association, vol.

8, p. 273.) At Memphis, in 1879, the National Board of Health, by co-operating with State and local boards, scattered the people in camps, and so preserved them from the plague; but we are told that at Brownsville "the Treasury Department had no authority to send the people into a camp away from their home."

Dr. Hamilton claims (p. 12) that there has never been a time when vessels could not be inspected by officers of the Marine Hospital Service, and shows by copies of letters and papers that the Louisiana board of health asked him to institute them, but he does not explain that the local authorities on the shores of the Mississippi above New Orleans did not have confidence in his Service and would not accept his certificates of inspection. After one shipmaster had been fined fifty dollars by Judge Hadden, of Memphis, for entering that port without a certificate from the National Board of Health, although possessing one from an officer of the Marine Hospital Service, that Service was not called upon to make many inspections. (Proceedings Am. Pub. Health Association, vol. 8, p. 270.)

On page 13 Dr. Hamilton characterizes the railroad inspection of immigrants as "an infringement on the rights and duties of State and municipal boards of health, and cannot legitimately fall within the province of agents of the National Board." The State and local boards have not considered the co-operation with and co-ordination of local powers by the National Board in this light. On the contrary, those interested, from New York city westward, petitioned Congress at its last session to have the immigrant inspection service of the Board continued.

The letter of Mayor Tarble, of Pensacola, which was read in connection with remarks by Dr. Hamilton characterizing the appropriation fund of the National Board of Health as a corruption fund, now that the full report is in print, is found to have no bearing whatever on this Board. It only assails the integrity of Mayor Tarble's fellow-townsmen. When

trusting to memory and the impressions conveyed by Dr. Hamilton while filing the mayor's letter, and in the absence of a stenographic report of his words, the Board considered it necessary to place the whole of the records having reference to the aid given to Pensacola before the Committee. The whole of the bills, amounting to over \$9,000, were also submitted. The executive minutes show that the aid granted was in every instance approved by the member of the Board representing the Marine Hospital Service. Col. Waring has well said that had the Board spent \$2,000 for the corrupt purpose that Dr. Hamilton substantially charged, absolute evidence of the fact would have been ready to his hand. Dr. Bailhache would have furnished it. But instead of evidence of this character Dr. Bailhache furnishes only a letter, (p. 22,) in which he denies matters of fact. He says that he did not approve the Pensacola bills, and that as bills were passed on a majority vote the record does not show that he voted aye, or that he voted at all. When the vote was unanimous it was not the custom to repeat on the record the names of those present, but all negative votes and failures to vote were recorded; and as the record shows that he did not place himself upon it in opposition to the payment of any of the bills, even passively by a failure to vote, it as clearly indicates that he voted aye on these appropriations and payments. He further states that he was not present when the sum of \$2,000 was appropriated on November 16, '82. But this money was not appropriated at that meeting. On the arrival of the telegram of Nov. 4, signed by the members of the Pensacola board asking for additional relief to pay nurses for ten days beyond Oct. 14, not to exceed \$2,000, it was submitted to the resident members, Dr. Bailhache included, and in accordance with their vote the Pensacola board was notified that the relief would be granted. At the meeting on the 16th this action was formally approved and entered on the records. Dr. Bailhache was not present at this meeting, but at the meeting on Dec. 5 the following entry

regarding Pensacola was read and approved in Dr. Bailhache's presence and with his concurrence :

“ That on Nov. 4 a telegram was received from Dr. Jno. C. Whiting, sec'y Pensacola board of health, representing the great destitution of the population and the inadequacy of the relief fund, and requesting further aid for the payment of nurses not to exceed two thousand dollars. That the resident members of this Committee were consulted as to the action to be taken on this request, and that, in accordance with the views of the Committee thus gathered, a telegram was despatched granting further aid to the Pensacola board for nurses to be paid on rolls as heretofore, the sum not to exceed \$2,000.”

But Dr. Bailhache had a more intimate knowledge of these bills than appears from the record, for on their arrival for settlement he examined them in the presence of the secretary of the Board and in the presence of others in the office of the Board, and suggested that the local board was put to much trouble in fulfilling the requirements of circular 7, and that for his part he would vote to turn the money over in bulk to the local board, taking the receipt of its president or secretary therefor.

Dr. Hamilton desires (p. 50, Rept. to Sec'y Treas'y) to prove the unwieldy character of the Board in times of emergency. Surely some illustration of that unwieldiness, if it existed, might have been drawn from the incidents of the terrible epidemic of 1879, and sustained by the verdict of the people of the Mississippi Valley States. It certainly was not manifested in the emergency at Brownsville, the needs of which city were fully known to the National Board and communicated by it to the Supervising Surgeon-General of the Marine Hospital Service, who did not know them until so communicated, but who, nevertheless, was fitting out a relief-ship for their supply. (See Board's Statement, page 9.) Nor was it manifested at Pensacola, Fla., as a reference to the telegrams and extracts from the records already submitted will clearly show. But it *was* manifested, according to Dr. Ham-

ilton, in the epidemic of small-pox on the Upper Missouri, and the Committee is referred to an official document—his own report for the year 1882—for the proof. The statistics of this epidemic I find are not tabulated in the report, but an examination of the money expenditures shows that *three* men were cared for during the prevalence of the epidemic, and that these three men were sailors of the river steamer “General Meade,” the expenses of their treatment having been paid from their own—the Marine Hospital fund. It is in the face of this epidemic that Dr. Hamilton elects to demonstrate the unwieldiness of the Board. But he should remember and place it to the credit of the Board that when he presented the telegram of the collector of customs of Ft. Benton to Dr. Turner, then secretary of the Board, that gentleman was unaware of the extent of the epidemic. The telegram only was before him. It said :

“FORT BENTON, MONT., *May 12, 1882.*

“Steamer General Meade in Missouri river *en route* to this point has small-pox on board. At request of local authorities I shall order her to be quarantined below Coal Banks station, forty miles below here. There are no Territorial sanitary laws. More boats coming with disease reported on board. I ask instructions by telegraph.

“W. H. HUNT, JR.,
“*Collector of Customs.*”

Dr. Turner was well aware that cases of small-pox were occurring at that time in many parts of our country, (see National Board of Health Bulletins for May, 1882,) and that the local authorities were alive to the importance of isolation and vaccination in preventing the spread of the disease. He knew, also, that while the Board was at that time organizing an inspection of immigrants to prevent the importation of small-pox from abroad, the local authorities were generally competent to deal with the disease within their respective jurisdictions. In the few cases where aid was required the Board acted on the applications of such local authorities as were presumably referred

to in Mr. Hunt's telegram, and not on the personal application of the Surgeon-General of the Marine Hospital Service. Nevertheless, the Secretary of the Board, in sympathy with Dr. Hamilton's evident excitement, courteously offered to call a meeting of its executive committee. But in the Surgeon-General's opinion this emergency was too urgent to be met by the men and methods which had dealt with yellow fever in Memphis. "This will not do," he said; "something has got to be done at once."

Dr. Hamilton will have to get up a better illustration of the unwieldiness of the Board. "This will not do." It has demonstrated only the urgency of his desire in this direction.

Dr. Hamilton closes by enumerating the facilities possessed by his Service for the management of quarantine. It is hardly necessary to suggest that Collectors of Customs, the thirty-seven vessels besides harbor tugs of the Revenue Cutter Service and the Coast Survey, have duties to attend to which would possibly prevent their detail *en masse* to duty under the Supervising Surgeon-General, as aids in quarantine work. Strictly speaking, the Marine Hospital Service has its hospitals and its medical officers. Dr. Hamilton allows that the former cannot be employed as yellow fever hospitals—and as to the latter, if they are employed on quarantine or yellow fever work, they must cease to be Marine Hospital Service doctors, for these are paid from the merchant sailors' fund for caring for the sick of the mercantile marine. If a quarantine bureau is to be organized in the Treasury, it must be in addition to the Marine Hospital Service. The Hospital Service cannot be quarantine doctors paid by the United States Government, and attending physicians paid from the sailors fund at one and the same time.

CHARLES SMART,
Surgeon U. S. Army,
Member National Board of Health.

